GALVESTON CENTRAL APPRAISAL DISTRICT

9850 EMMETT F LOWRY EXPWY, STE A * TEXAS CITY, TEXAS 77591

APPLICATION FOR EMPLOYMENT

It is the Galveston Central Appraisal District's policy to provide equal opportunity in all of its operations and in all areas of employment practice and to assure that there shall be no discrimination against any employee or applicant for employment on the grounds of race, color, religion, sex, national origin, or age.

PERSONAL INFORMATION

Today's Date _____ **Date of Birth** _____

Name _____
Last First Middle

Mailing Address _____
Street City State Zip Code

Permanent Address _____

Telephone _____ Are you over 18 years of age? [ ] No [ ] Yes

Referred by _____

If related to anyone at GCAD, state name: _____ Relationship: _____

EMPLOYMENT DESIRED

Type of work desired _____ Date you can start _____ Salary Desired $ _____

Are you employed now?_____ If so, may we contact your present employer? _____

Ever applied to a district before?_____ Where _____ When _____

EDUCATION

List in order the names and locations of High School, Colleges, or Trade School attended	From (Mo. & Yr.)	To (Mo. & Yr.)	Grade Level Achieved	Nature of Course

List additional Technical Training such as TAAO Courses. Also, list any professional designations from a professional association of assessors or appraisers.

C.T.A.	Date Certified	Number	R.P.A.	Date Certified	Number	DONOTUSETHISSPACE
S.R.A.	Date Certified	Number	Other	Date Certified	Number	

Completed Courses (If certification not yet attained.)	Date

SKILLS

List below any additional special training or work experiences you may have. Such as: drafting, electronics, keypunch, computer, shorthand, speed writing, etc.

What language, other than English, do you fluently: Speak Read Write

EMPLOYMENT RECORD

List below the last four employers starting with last one first. Dates should be continuous. If unemployed for any period, make note of unemployment period.

Date Mo. & Yr.		Name & Employer Address	Position	Reason for Leaving	May we Contact
From	To				

Is there a reason why you would not be able to be registered with the Texas Department of Licensing and Regulation? If yes, please explain.

In case of emergency, notify:

NAME	RELATIONSHIP	CONTACT

In consideration of rights and privileges of employment with the Galveston Central Appraisal District, I hereby agree to abide by the District's Rules and Regulations. I hereby authorize any properly designated official to conduct whatever investigation necessary in connection with the data given herein.

I hold free from liability all former employees or other persons who may in response to inquiries made by the District furnish true information pertaining to my reputation, employment, and health history and the Galveston Central Appraisal District in the use of such data in reciprocal inquiries from other companies.

I further agree that if it is found that I have falsified or omitted information from this questionnaire such falsification or omission shall be construed to be fraud against the District and shall be sufficient grounds for dismissal if I shall be an employee of the company.

I attest to the fact that this application was signed by me.

Date _____ Signature _____

List below any additional information which may be helpful in considering your application.

FOR OFFICE USE ONLY

DATE OF HIRE	
POSITION	
REPORT TO	
EMPLOYEE ID	